

## APPLICATION FOR MARRIAGE/DIVORCE CERTIFICATE

Please Print Or Type All Information Required On This Form

Please Circle Type of Record Requested

Full Name of Husband \_\_\_\_\_

Maiden Name of Wife \_\_\_\_\_

County In Which \_\_\_\_\_ Marriage License Issued \_\_\_\_\_ Divorce Decree Granted \_\_\_\_\_

Date of \_\_\_\_\_ Marriage \_\_\_\_\_ Divorce \_\_\_\_\_  
(Mo.) (Day) (Year)

\_\_\_\_\_  
Name of Applicant

Applicants Phone Number \_\_\_\_\_  
(Area Code) (Number)

Office Use Only

Vol. \_\_\_\_\_

Cert. \_\_\_\_\_

Year \_\_\_\_\_

Date \_\_\_\_\_

Initials \_\_\_\_\_

A \$6.00 fee must accompany this application. The fee cannot be returned. If the certificate is on file you will receive one copy. Additional copies are \$6.00 each. Make check or money order payable to "Kentucky State Treasurer". When complete, mail the entire form to Vital Statistics, 275 East Main, Frankfort, Kentucky 40621.

Check Type of ☐ Marriage - \$6.00 Each copy - Quantity desired \_\_\_\_\_

Copy desired ☐ Divorce - \$6.00 Each Copy - Quantity desired \_\_\_\_\_

Mailing Address Required.

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